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UHC Certifications 2023/2024 Exam| Actual Questions and Verified Answers| Graded A

Q: What are two options for Medicare consumers to get Part D prescription drug coverage (assuming they meet all eligibility requirements)? (Select 2)

Answer:
Enroll in a stand-alone Medicare Prescription Drug Plan (PDP)

Enroll in a Medicare Advantage Plan or other Medicare health plan that includes prescription drug coverage

Q: Which of the following statements does NOT correctly define prescription drug stages?

Answer:
A deductible is the amount the member must pay for every prescription medication, regardless of what stage they are in.

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Q: Which of these statements is NOT true about the drug utilization management (UM) rules?

Answer:
(INCORRECT) Prior authorization, quantity limit, and step therapy are some examples of UM rules

Q: What is the amount added to the member's monthly plan premium if they did NOT enroll in a Medicare Advantage plan with Part D benefits or stand-alone prescription drug plan when they were first eligible for Medicare Parts A and/or B or went without creditable prescription drug coverage for 63 or more continuous days?

Answer:
Late Enrollment Penalty (LEP)

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Q: Can a consumer who qualifies for Low Income Subsidy receive financial assistance for their part of Medicare Part D costs?

Answer:
Yes, through subsidies such as lower or no monthly plan premiums and lower or no copayments

Q: Formulary is defined as:

Answer:
A list of medications covered within the benefit plan, based on CMS guidelines and developed in collaboration with physicians and pharmacists.

Q: Which of the following is true about Medicare Supplement Insurance underwriting criteria in states where underwriting applies?

Answer:
Underwriting is required if the consumer is not in their Medicare Supplement Open Enrollment period or does not meet Guaranteed Issue criteria.

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Q: The Medicare Access and CHIP Reauthorization Act of 2015 (MACRA), which went into effect January 1, 2020, applies to all carriers offering Medicare supplement plans.

Answer:
True

Q: Which of the following is NOT true of Medicare Supplement Insurance Plans?

Answer:
(INCORRECT) Plan benefit amounts automatically update when Medicare changes cost sharing amounts, such as deductibles, coinsurance and copayments.

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Q: Which of the following consumers are eligible for Medicare if other eligibility requirements are met?

Answer:
Consumers age 65 or older, consumers under 65 years of age with certain disabilities for more than 24 months and consumers of all ages with ESRD or ALS

Q: Which of the following defines a Medicare Advantage (MA) Plan? (Select 3)

Answer:
An MA Plan is a health plan option approved by Medicare and offered by private insurance companies.

An MA Plan provides Medicare hospital and medical insurance (Medicare Part A and Part B) and often includes Medicare prescription drug coverage (Part D).

An MA Plan is part of Medicare and is also called Part C.

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Q: Janice wants to enroll in a Medicare Advantage plan. Which of the following is NOT an eligibility requirement?

Answer:
Does not have any pre-existing conditions, such as diabetes or End Stage Renal Disease (ESRD)

Q: Which of the following are MA Plans that focus on using network providers to maximize the benefits and reduce out-of-network expenses?

Answer:
HMO, POS, PPO

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